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WITH THIS RETURN \$ 2/7.58

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT POLD, BEND OR STAPLE THIS CARD

Anus C. FIRENAM
SIGNATURE OF PERSON FILING THIS RETURN
11676

THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

- COLUMN NO. 1 All permits which were not concelled prior to the beginning of the calendar quarter are to be reported on your tax return. If the vehicle traveled under more than one rate of tax, insert the permit number for each tax rate below the permits which are listed, or interline the rate and miles.
- COLUMN NO. 2 Report rate of tax under which vehicle traveled (See schematic drawings on reverse side).
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- COLUMN NO. 5 Report in this Column the Ohio mileage on which the tax that is due will be paid by the lessee or lessor.
- COLUMN NO. 6 Report the name of the lessee or lessor (company or person) who will pay the tax on the mileage reported in Column 5.

OHIO HIGHWAY USE TAX RETURN

HUT 15

(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLLIMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
53-002345-0001	. 015	14000	\$210.00			
53-002345-0001	020	15000	300.00			
53-002345-0002	020			12000	Red Ryder Transit	
53-002345-0003	015			15000	Fanner Truck Lines	
53-002345-0004		None				
				CA	MPLE	
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MITH THIS RETURN \$ 510.00

IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

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SIGNATURE OF PERSON FILING THIS RETURN	
TITLE	DATE

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I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

AMOUNT REMITTED WITH THIS RETURN

SIGNATURE OF PERSON FILING THIS RETURN

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53-002345-0004		None	,			
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				7	MIPLE	

\$ 510.00

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I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

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53-002345-0002	020			12000	Red Ryder Transit	
53-002345-0003	015			15000	Fanner Truck Lines	
53-002345-0004		None				<u></u>
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\$ 510,00

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PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

	SIGNATURE OF PERSON FILING TH	IS RETURN
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IMPORTANT NOTICE

EFFECTIVE OCTOBER 13, 1975, THE HIGHWAY USE TAX OFFICE OF THE DEPARTMENT OF TAXATION WILL OBSERVE THE FOLLOWING SCHEDULE:

MONDAY THROUGH FRIDAY 8:00 A.M. TO 5:00 P.M. EXCEPT LEGAL HOLIDAYS.

IN ACCORDANCE WITH THE ABOVE SCHEDULE NO EMERGENCY TEMPORARY AUTHORITIES WILL BE ISSUED AFTER 5:00 P.M.

IF THIS NOTICE IS RECEIVED BY ANY PERSON OTHER THAN THE PERMIT HOLDER IT SHOULD BE FORWARDED TO HIM SO THAT HE IS PROPERLY NOTIFIED.

OHIO HIGHWAY USE TAX P. O. BOX 530 COLUMBUS, OHIO 43216

TELEPHONE (614) 466-3921

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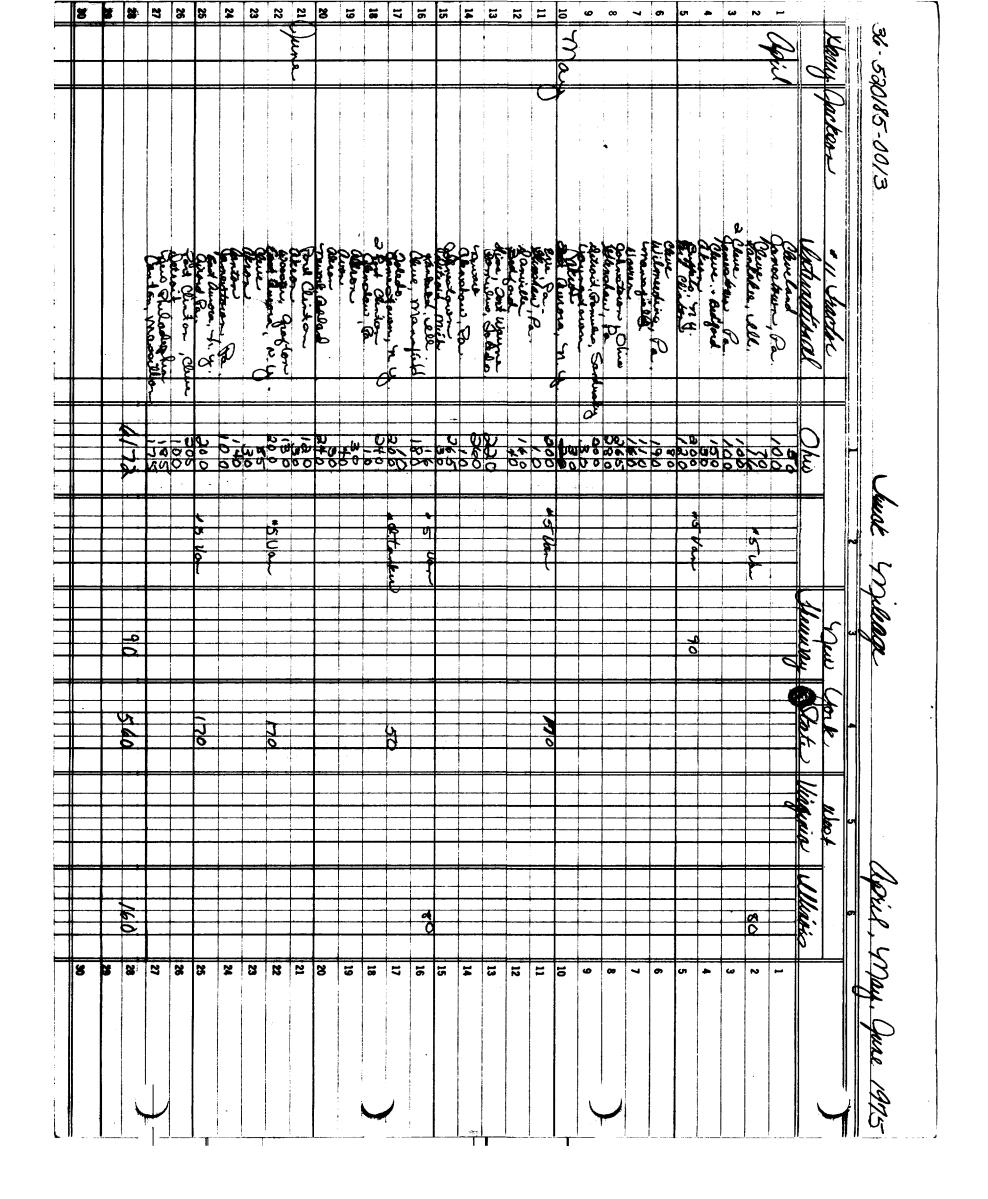
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			OHIO HIGHWAY U	SE TAX RETURN		HUT I
(1) PERMIT MUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) MAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDI ONLY
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SIGNATURE OF PERSON FILING THIS RETURN

E, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT POLD, BEND OR STAPLE THIS CARD

TITLE

HUT 8 REV. 6-74

ADDRESS _____

5. PLEASE INDICATE YOUR HIGHWAY USE TAX ACCOUNT NUMBER _____

STATE OF OHIO DEPARTMENT OF TAXATION P. O. BOX 530, COLUMBUS, OHIO 43216 PHONE (AREA CODE 614) 466-3921

ACCOUNT NO.

	A	PPLICATION FOR HIGHWAY		[SOCIAL SEC	URITY NO.
		TYPE OR PRINT IN I	NK .	0 -		
1. VEHICLE	FIRST	MIDDLE	LAST	_ ₀₋	SOCIAL SEC	CURITY NO.
2. 1 = INI	DIVIDUAL	2 = PARTNERSHIP	0 = CORPORATION	- 1-	FEDERAL	1. D. NO.
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	(CIT		(STATE)		(ZIP CODI	Ξ)
4. MAIL PERM	IT TO: NAME					



STATE OF OHIO DEPARTMENT OF TAXATION

HUT 8-0

HIGHWAY USE TAX
68 EAST GAY STREET, COLUMBUS, OHIO 43215
PHONE (AREA CODE 614) 469-3921

APPLICATIONS NOT COMPLETED IN ACCORDANCE WITH THESE INSTRUCTIONS WILL BE RETURNED INSTRUCTIONS FOR COMPLETING APPLICATION FOR HIGHWAY USE PERMIT

- 1. Give the exact full first, middle and last name of vehicle owner, or if a partnership, each partner's full name. If initials only, indicate by inserting (ONLY) in parenthesis, following the initials. If owner has no middle name, indicate by inserting (NONE) above the space provided for middle name. Also insert Social Security Number of owner or owners.
- 2. Check whether the owner is an individual, partnership or corporation. If owner is a corporation, indicate Federal Employer Identification Number.
- 3. Give legal residence of owner, Street or RFD No. Lessee's address is not acceptable.
- 4. If original permit is to be sent to an address other than the owner's address, so indicate.
- 5. Has the owner shown on Line 1 been previously issued an Ohio Highway Use Permit? If answer is yes, please indicate permit number assigned.
- 6. List all commercial cars and/or tractors which are subject to the Ohio Highway Use Tax. List each vehicle separately and give the appropriate information on each vehicle in spaces provided.

THE COLUMNS UNDER ITEM 6 SHALL CONTAIN THE FOLLOWING INFORMATION:

- (A) Make of Vehicle Trade name of vehicle, i.e., Ford, Mack, etc.
- (B) Year The year in which the vehicle was manufactured.
- (C) Number Axles on Truck or Tractor Indicate number of axles on the commercial car and/or tractor including front axle. Do not include axles of trailers.
- (D) Type of Vehicle Indicate whether the vehicle is a truck or tractor. (A 2 axle truck does not require a permit unless pulling a trailer weighing 3,000 pounds or more.)
- (E) Manufacturer's Serial Number The serial number assigned by the manufacturer which is either stamped, embossed or otherwise affixed to the vehicle. (Motor number not acceptable).
- (F) State in Which Vehicle is Titled Show the State in which the title of the vehicle was issued.
- (G) State in Which Vehicle is Licensed Show the State from which licenses were purchased.

The application must be signed and dated by the owner or his authorized agent.

SEND APPLICATION AND FEE OF \$2.00 FOR EACH PERMIT REQUESTED TO:

OHIO HIGHWAY USE TAX 68 East Gay Street Columbus, Ohio 43215

SEE REVERSE SIDE



STATE OF OHIO **DEPARTMENT OF TAXATION**

STATE OFFICE TOWER P. O. BOX 530 COLUMBUS, OHIO 43216

February 6, 1975

Obitts Chemical Company 142 Locust Street P.O. Box 375 Elyria, Ohio 44035

In Re: Ohio Highway Use Tax

Attn: James C. Freeman, President

Account 36-520185

Gentlemen:

This will acknowledge receipt of your recent correspondence with which you indicated a change in name.

We wish to advise, if the legal entity of your equipment has changed and the title of the vehicle(s) reflect this change, you will be required to procure an Ohio Highway Use permit(s) in the new owner's name. An Ohio Highway Use permit(s) may be obtained by properly completing the enclosed application form Hut 8 and forwarding to this department with a \$2.00 fee for each permit requested. Also, you will be required to return the active permit(s) to this office, accompanied by a letter requesting cancellation.

However, if this is a name change only where the corporate structure remains the same, and if the title of the vehicle(s) reflect this change, you will be required to procure a corrected Highway Use permit card(s) to reflect the proper name. A corrected Highway Use permit card(s) may be obtained by properly completing the enclosed replacement application form(s) Hut 8-B, and forwarding to this office with the appropriate fee of \$1.00 (for each permit card requested).

We will take no further action in this matter until we hear from you.

Very truly yours,

Robert a. Beverage Robert A. Beverage, AGent

Permit Unit

Highway Use Tax Section

ved Encl. Hut 8('s) Hut 8-B('s)

(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST ONIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST ONIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDIT ONLY
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AMOUNT REMITTED \$ 246,96

COMPANYING

IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

SC FREEMAN Gen Mar.

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OHIO HIGHWAY USE TAX RETURN

HUT 15

(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO HOT USE FOR AUDIT ONLY
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AMOUNT REMITTED \$ 510.00

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PLEASE DO NOT POLD, BEND OR STAPLE THIS CARD

SIGNATURE OF PERSON FILING THIS RETURN	

January 31, 1975

State of Ohio D Depurtment of Taxation P.O. Box 530 Columbus, Ohio 43216

Dear Sir:

This is to inform you that we have officially changed the name of this company from Obitts Chemical Company to Chemical Recovery Systems. Inc., 142 Locust Street, Elyria, Ohio 44035. *Please change your records accordingly.

Our HUT number is 36-520185-0011, 0012, 0013.

Yours truly.

James C. Freeman, President Chemical Recovery Systems, Inc.

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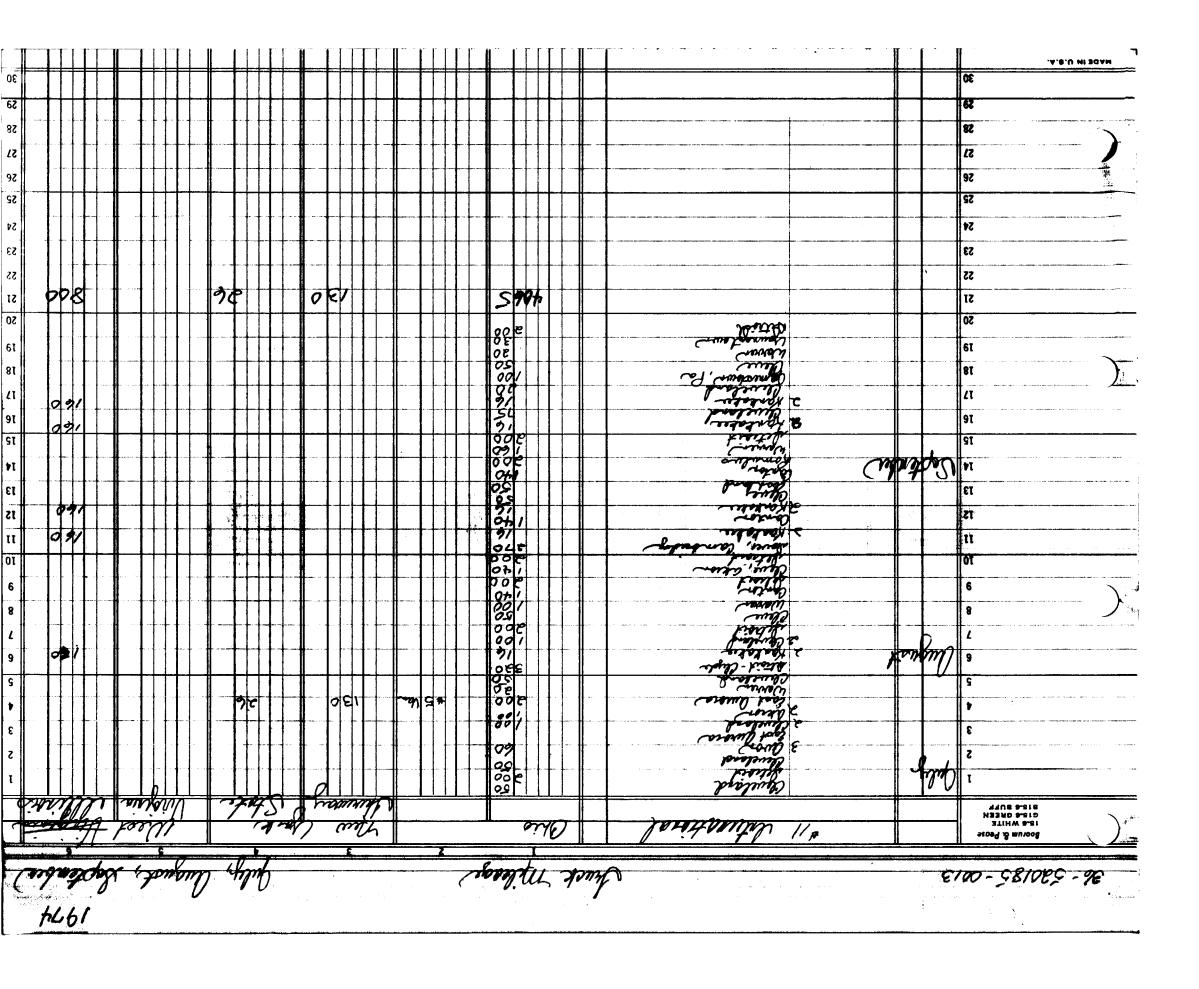
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WITH THIS RETURN \$ 282.98

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OHIO HIGHWAY USE TAX RETURN

HUT 15

DATE

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53-002345-0003	015			15000	Fanner Truck Lines	
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AMOUNT REMITTED \$ 510.00

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OHIO HIGHWAY USE TAX RETURN

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15 SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

MOUNT REMITTED \$ 319.34

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

SIGNATURE OF PERSON FILING THIS RETUI	tk ,
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THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

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- COLUMN NO. 1 All permits which were not cancelled prior to the beginning of the calendar quarter are to be reported on your tax return. If the vehicle traveled under more than one rate of tax, insert the permit number for each tax rate below the permits which are listed, or interline the rate and miles.
- COLUMN NO. 2 Report rate of tax under which vehicle traveled (See schematic drawings on reverse side).
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- COLUMN NO. 4 Report the amount of tax due on the mileage reported in Column 3. This is determined by multiplying the mileage shown in Column 3 by the tax rate shown in Column 2.
- COLUMN NO. 5 Report in this Column the Ohio mileage on which the tax that is due will be paid by the lessee or lessor.
- COLUMN NO. 6 Report the name of the lessee or lessor (company or person) who will pay the tax on the mileage reported in Column 5.

OHIO HIGHWAY USE TAX RETURN

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(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
53-002345-0001	. 015	14000	\$210. 00			
53-002345-0001	020	15000	300.00			
53-002345-0002	020			12000	Red Ryder Transit	
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IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

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SIGNATURE O	F PERSON FILING THIS	RETURN	
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(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDIT ONLY
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PLEASE DO NOT FOLD. BEIND OR STAPLE THIS CARD.

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THIS IS YOUR COPY DO NOT MAIL

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OHIO HIGHWAY USE TAX RETURN

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(1) PERMIT HUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
53-002345-0001	. 015	14000	\$210.00			
53-002345-0001	020	15000	300.00			
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IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

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I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT. PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

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OHIO HIGHWAY USE TAX RETURN

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IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

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FAILURE TO FILE A COMPLETE TAX RETURN PRIOR TO ITS DUE DATE WILL RESULT IN SUSPENSION OF YOUR PERMITS AND THE OHIO STATE PATROL BEING NOTIFIED OF SUCH ACTION.

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PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLLIMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDIT ONLY
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THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

- COLUMN NO. 1 All permits which were not cancelled prior to the beginning of the calendar quarter are to be reported on your tax return. If the vehicle traveled under more than one rate of tax, insert the permit number for each tax rate below the permits which are listed, or interline the rate and miles.
- COLUMN NO. 2 Report rate of tax under which vehicle traveled (See schematic drawings on reverse side).
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- COLUMN NO. 5 Report in this Column the Ohio mileage on which the tax that is due will be paid by the lessee or lessor.
- COLUMN NO. 6 Report the name of the lessee or lessor (company or person) who will pay the tax on the mileage reported in Column 5.

OHIO HIGHWAY USE TAX RETURN

HUT 15

(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDI ONLY
53-002345-0001	. 015	14000	\$210.00			
53-002345-0001	020	15000	300.00			
53-002345-0002	.020			12000	Red Ryder Transit	
53-002345-0003	.015			15000	Fanner Truck Lines	
53-002345-0004		None				ļ
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AMOUNT REMITTED \$ 510	.00				AL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTER	<u> </u>

FAILURE TO FILE A COMPLETE TAX RETURN PRIOR TO ITS DUE DATE WILL RESULT IN SUSPENSION OF YOUR PERMITS AND THE OHIO STATE PATROL BEING NOTIFIED OF SUCH ACTION.

TITLE

PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

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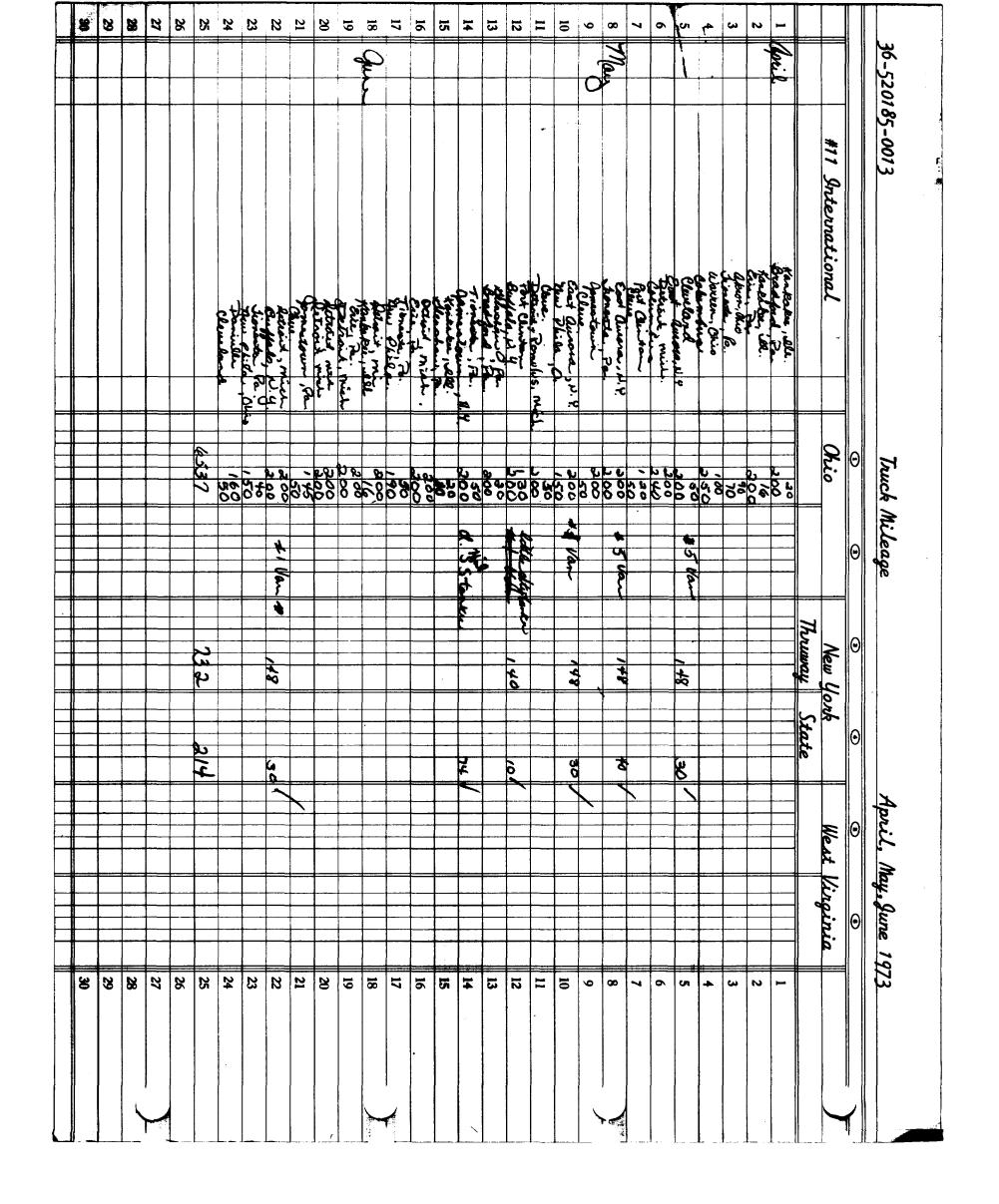
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NOTE: IN COLUMN C COUNT FRONT AND REAR AXLES ON TRUCK OR TRACTOR ONLY. DO NOT INCLUDE AXLES ON TRAILER.

Do Not Use		MAKE VEHICLE	(B) YEAR	(C) ⁻	O (D) I TRUCK OR TRACTOR	(E) MANUFACTURERS SERIAL NUMBER	(F) STATE TITLED	(G) STATE LICENSED
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FEE OF \$2.00 FOR EACH PERMIT REQUESTED MUST BE SUBMITTED WITH THIS APPLICATION.

I DECLARE UNDER THE PENALTIES OF PERJURY THAT THIS APPLICATION (INCLUDING ANY ACCOMPANYING STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BÉLIEF IS A TRUE, CORRECT AND COMPLETE APPLICATION

Ala saky his recta

Vice President April 19, 1973

HUT 8 (4-71)	STATE OF OHIO DEPARTMENT OF TAXA 68 EAST GAY STREET, COLUMBUS PHONE (AREA 614) 469-39	OHIO 43215 ACCOUNT NO	_36.	-52018 <u>5</u>
Te or and	APPLICATION FOR HIGHWAY IN TYPE OR PRINT IN IN	- · - -	F	SOCIAL SECURITY NO.
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ADDRESS	P.O. Box 375 Ely	ria, Ohio 44035		
	YOUR LAST PERMIT NUMBER ASSIGN	34 10		

HUT 15

(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST ONO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDIT ONLY
36-520185-0010	.01/2	2,810	43.05			
36-520185-0011	.02	7,162	143.24			
36-520135-0010 36-520185-0011 36-520185-0012	.02	7,184	143.68			

AMOUNT REMITTED

\$ 329.97

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

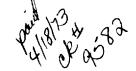
IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

VIAL PURE SIGNATURE OF PERSON FILING THIS RETURN

4//8/73 DATE

THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN



- COLUMN NO. 1 All permits which were not cancelled prior to the beginning of the calendar quarter are to be reported on your tax return. If the vehicle traveled under more than one rate of tax, insert the permit number for each tax rate below the permits which are listed, or interline the rate and miles.
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OHIO HIGHWAY USE TAX RETURN

HUT 15

(1) PERMIT MUMBER	(2) RATE OF TAX	(3) LIST CHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
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53-002345-0001	020	15000	300.00			
53-002345-0002	020			12000	Red Ryder Transit	
53-002345-0003	015			15000	Fanner Truck Lines	
53-002345-0004		None				
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(1) PERMY MIMBER	(2) RATE OF TAX	(3) LIST CHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(3) LIST ONIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDIT ONLY
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HUT 15

(1) PERMT MUMBER	RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
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53-002345-0001	020	15000	300.00			
53-002345-0002	,020			12000	Red Ryder Transit	
53-002345-0003	015	·		15000	Fanner Truck Lines	<u> </u>
53-002345-0004		None				
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AMOUNT REMITTED

\$ 510.00

IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT POLD, BEND OR STAPLE THIS CARD

SIGNATURE OF PERSON FILING THIS RETURN

TITLE

Ohio Highwa TO 68 East Con	~		THE OBITTS CHEMICAL CO.
	Chio 43215		142 LOCUST STREET P. O. BOX 375 ELYRIA, OHIO FA 3-3275
SUBJECT [®] FOLD \ Dear Sir:	Windshield Identifi	cation De	vice DATE: April 30, 1973
Enclo	osed please find the	windshie	ld identification device for
	ord tractor which ha		·
		754 Market	
		Doroth	4 K. Obitts, Vice President
PLEASE REPLY TO	→ SIGNED // o		& Ohiers
		 	
			
DATE	SIGNED		

FROM

GRAYARC CO., BROOKLYN 82, N. Y.

DETACH THIS COPY - RETAIN FOR ANSWER. SEND WHITE AND PINK COPIES WITH CARBONS INTACT.

TO 68 Easy G	•	142 LOC P. O.	CHEMICAL CO. UST STREET BOX 375
Columbus,	Ohio 43215		RIA, OHIO 3-3275
SUBJECT: Wind	dshield Identification	Device	DATE: April 12, 1973
FOLD & Dear Sir:			
Plea	ese cancel the Highway	Use Tax permit for our 1	967 F ord.
We are app	plying for a permit for	a 1970 International Ta	actor, 3 axles,
Serial # 2	2594710406456. State t	itled and licensed - Ohi	0.
Enc	losed is \$2.00 for the	permit. Thank you,	
		•	
PLEASE REPLY TO	signed	Ly K. Obitts Vice 1	President
		*	
			20 4 4570
			Ad. Ch
			<u> </u>
DATE	SIGNED		

FROM

GRAYARC CO., BROOKLYN 32, N. Y.

DETACH THIS COPY - RETAIN FOR ANSWER. SEND WHITE AND PINK COPIES WITH CARBONS INTACT.

Round Trip	3							A. S.						via tumpike	•				Huron O 70mi		via turnpike	,		(8) (8)	Chellen In offini	92E W.VA	Wheeler of Lan.	(Assessed)
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Ohio	Akron, O	Alliance, 0	Avon, 0	Bedford Hgts, O	Berea, O	Brunswick, 0	Buffalo, N. Y.	Cleveland, 0	Columbus, 0	Danville, O	Dayton, O	Detroit, Mich.	Dover, O	Elkhart, Ind.	Erie, Pa.	Euclid, 0	Hirt, Mich.	Ginand, 0	Heath, O	gamestown, Pa.	Londstown, 0	Mansfield, 0	Meadville, Pa	Medina, O	Niles, Og	New Philadelphia,	Sidney, 0	St. Marys, Pa

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STATE OF OHIO DEPARTMENT OF TAXATION

HIGHWAY USE TAX

68 EAST GAY STREET, COLUMBUS, OHIO 43215 PHONE (AREA CODE 614) 469-3921

n April 17, 1973

Obitts Chemical Co P.O. Box 375 Elyria, Ohio 44035

Gentlemen:

In reference to your recent communication or inquiry, you will find enclosed an application (HUT 8) for an Ohio Highway Use Permit. The application must be completed in accordance with the instructions provided. Any application which does not indicate all the required information will be returned. A fee of \$2.00 is required for each permit requested, and must accompany the application in the form of a check or money order. A return envelope is enclosed for your use.

PLEASE READ INSTRUCTIONS BEFORE COMPLETING APPLICATION.

After processing your application, the Ohio Highway Use Permit and identification device will be mailed to the address indicated on line 4. The permit is valid for the life of the vehicle it describes, as long as the legal ownership or description of the vehicle does not change. If your account is kept current, a new identification device will be forwarded to you without cost near the end of each calendar year.

E cl/

Very truly yours,

Check # 9572, Amount \$2.00

Vera McCormick

Permit Unit Highway Use Tax

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IMPORTANT NOTICE

THE 1973 NO COST WINDSHIELD IDENTIFICATION DEVICES WILL BE MAILED TO ALL REGISTERED OWNERS ON OR ABOUT NOVEMBER 1, 1972. IN THE EVENT THE RENEWALS ARE NOT RECEIVED BY NOVEMBER 20, 1972, PLEASE CONTACT THIS OFFICE IN ORDER TO VERIFY THE STATUS OF YOUR ACCOUNT.

OHIO HIGHWAY USE TAX 68 EAST GAY STREET COLUMBUS, OHIO 43215 TELEPHONE (614) 469 – 3921

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(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST ONIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY INFO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
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AMOUNT REMITTED WITH THIS RETURN	\$ 363,16	
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IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT BOLD ABOUT OR STARLE THIS CARD

	SIGNATURE OF PERSON FILING T	THIS RETURN
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TITLE		DATE

THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

- COLUMN NO. 1 All permits which were not cancelled prior to the beginning of the calendar quarter are to be reported on your tax return. If the vehicle traveled under more than one rate of tax, insert the permit number for each tax rate below the permits which are listed, or interline the rate and miles.
- COLUMN NO. 2 Report rate of tax under which vehicle traveled (See schematic drawings on reverse side).
- COLUMN NO. 3 Report empty and loaded Ohio miles for each vehicle for which you are paying the tax. If a vehicle did not travel in Ohio or if all miles were nontaxable, write "None" opposite that permit. Mileage on the Ohio Toll Turnpike should not be reported.
- COLUMN NO. 4 Report the amount of tax due on the mileage reported in Column 3. This is determined by multiplying the mileage shown in Column 3 by the tax rate shown in Column 2.
- COLUMN NO. 5 Report in this Column the Ohio mileage on which the tax that is due will be paid by the lessee or lessor.
- COLUMN NO. 6 Report the name of the lessee or lessor (company or person) who will pay the tax on the mileage reported in Column 5.

OHIO HIGHWAY USE TAX RETURN

HUT 15

(1) PERMIT MUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
53-002345-0001	. 015	14000	\$210.00			
53-002345-0001	020	15000	300.00			
53-002345-0002	. 020			12000	Red Ryder Transit	
53-002345-0003	015			15000	Fanner Truck Lines	
53-002345-0004		None				
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THIS IS YOUR COPY. DO NOT MAIL.

NOTE: IN COL. C FRONT & REAR AXLES ON TRUCK OR TRACTOR ONLY. DO NOT INCLUDE AXLES ON TRAILER.

6.		I IAI Make Venicie I		(A) Make Vehicle (B) (C) (D) Year Axles (Truck or Trace)		(D) (Truck or Tractor)	(E) Manufacturers Serial Number	(F) State Titled	(G) State Licensed
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	3.								
	4.								
	5.								
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Fee of \$2.00 for each permit requested must be submitted with this application.

I declare under the penalties of perjury that this application (including any accompanying statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete application.

SIGNATURE		TITLE	DATE
	NOTICE		Pd. #2.00 #8823 6-30-72

TEMPORARY AUTHORITY: In cases of emergency, temporary travel authority for thirty (30) days can be obtained by wiring via Western Union to this department at 68 East Gay Street, Columbus, Ohio, a fee of two dollars (\$2.00) for a new permit, or one dollar (\$1.00) for a replacement permit or identification device, with a request for temporary authority containing the following information:

- a. Request temporary authority
- b. Full name of legal owner (First, Middle and Last)
- c. Legal resident address of owner
- d. Manufacturer's serial number of vehicle
- e. Point of authority "pickup" if different from the owner's legal residence address
- f. Permit number (replacements only)
- g. Account number of owner, if previously registered

A collect telegram will then be dispatched authorizing the travel and must be carried in the cab of the vehicle as evidence of such authorization. After the thirty (30) day temporary authority has been issued, the prescribed application form will be sent to the owner of the vehicle which must be completed and returned to the Highway Use Tax Section of this Department prior to the expiration date of that authority. No additional fee will be required for the issuance of the permanent permit card and identification device but, failure to file this application within the time allotted or pay the tax liability incurred while traveling with a temporary authority, will result in denial of future temporary authority requests. Thirty day temporary authority may also be obtained by written request enclosing the required fee with the completed application. The request must contain a statement as to whether the temporary authority should be wired or mailed, and the point of delivery of such authority, if different from the owner's legal address.

(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO HOT USE FOR AUDIT ONLY
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IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO HOT	FOLD.	REND :	OR STAPLE	THIS CARD

WP.	SIGNATURE OF PERSON FILING THIS RETURN	10/16/22
TITLE		DATE

THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

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OHIO HIGHWAY USE TAX RETURN

HUT 15

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53-002345-0001	020	15000	300.00			
53-002345-0002	,020	_		12000	Red Ryder Transit	
53-002345-0003	015			15000	Fanner Truck Lines	
53-002345-0004		None				<u> </u>
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THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

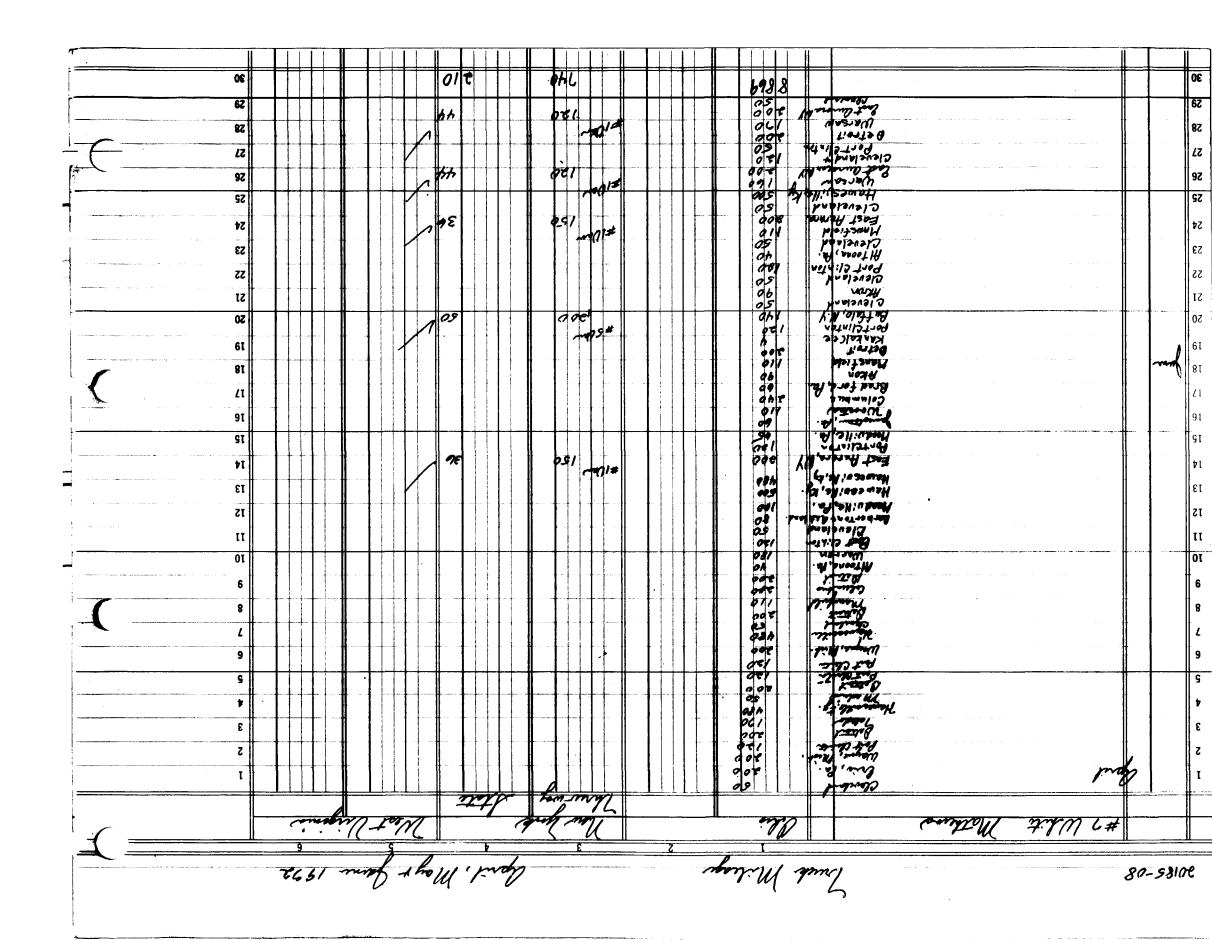
- COLUMN NO. 1 All permits which were not cancelled prior to the beginning of the calendar quarter are to be reported on your tax return. If the vehicle traveled under more than one rate of tax, insert the permit number for each tax rate below the permits which are listed, or interline the rate and miles.
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53-002345-0002	020			12000	Red Ryder Transit	
53-002345-0003	015			15000	Fanner Truck Lines	
53-002345-0004		None				
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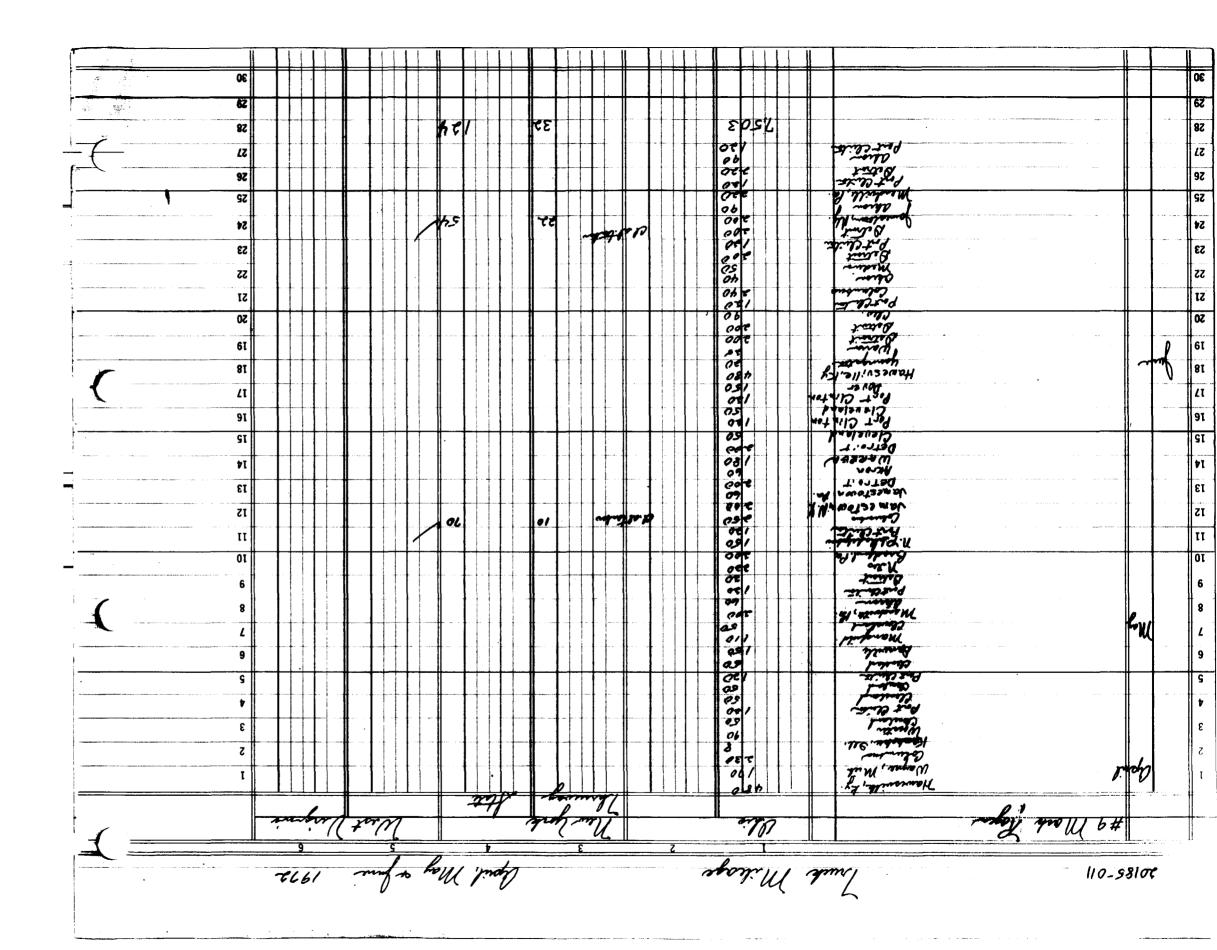
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121 , Office , AA507 , 788-5093

OHIO HIGHWAY USE TAX RETURN

HUT 15

(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDIT ONLY
36-52 <i>018</i> 5-0008	. 02	7,640	152.80			
36-520185-0008 36-520185-0010 36-520185-0011	.01-	3.790	56.85			
36-520185-0011	. 02	10,766	215.32			
		-,-		_		
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AMOUNT REMITTED	يغا	10
WITH THIS RETURN	\$ 4	~

4.97 I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE

AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

۱F	SUPF	LEMENTA	L SHEETS	ARE	USED,	ENTER	ONLY	AMOUNT	REMIT	TE

1/:	DSIGNATURE OF PERSON FILIN	G THIS RETURN
vice-	Presidnt	4-/-/2
TITLE		DATE

THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

- COLUMN NO. 1 All permits which were not cancelled prior to the beginning of the calendar quarter are to be reported on your tax return. If the vehicle traveled under more than one rate of tax, insert the permit number for each tax rate below the permits which are listed, or interline the rate and miles.
- COLUMN NO. 2 Report rate of tax under which vehicle traveled (See schematic drawings below)
- COLUMN NO. 3 Report empty and loaded Ohio miles for each vehicle for which you are paying the tax. If a vehicle did not travel in Ohio or if all miles were nontaxable, write "None" opposite that permit. Mileage on the Ohio Toll Tumpike should not be reported.
- COLUMN NO. 4 Report the amount of tax due on the mileage reported in Column 3. This is determined by multiplying the mileage shown in Column 3 by the tax rate shown in Column 2.
- COLUMN NO. 5 Report in this Column the Ohio mileage on which the tax that is due will be paid by the lessee or lessor.
- COLUMN NO. 6 Report the name of the lessee or lessor (company or person) who will pay the tax on the mileage reported in Column 5.

OHIO HIGHWAY USE TAX RETURN

HUT 15

(1) PERMIT MUMBER	(2) RATE OF TAX	(3) LIST OHO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
53-002345-0001	.015	14000_	\$210.00			
53-002345-0001	020	15000	300.00			
53-002345-0002	020		-	12000	Red Ryder Transit	
53-002345-0003	015			15000	Fanner Truck Lines	
53-002345-0004		None				
				CA	MDIE	
				37	MPLE	

AMOUNT REMITTED WITH THIS RETURN \$ 510.00

(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDIT ONLY
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36-520185-0010	.01	£ 2574	38.61			
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			72			
			20 Me			
		pd.	2840			

WITH THIS RETURN \$ 325.27

IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

Vice President 1/17/72

TITLE President 0/17/72

THIS IS YOUR COPY DO NOT MAIL

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OHIO HIGHWAY USE TAX RETURN

HUT 15

						1101 13
PERMIT NUMBER	(2) RATE OF TAX	LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDIT ONLY
53-002345-0001	.015	14000	\$210.00			
53-002345-0001	020	15000	300.00			
53-002345-0002	020			12000	Red Ryder Transit	
53-002345-0003	015			15000	Fanner Truck Lines	
53-002345-0004		None				
				SA	MPLE	
				7	MILFE	

AMOUNT REMITTED \$ 510.00

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	SIGNATURE OF PERSON FILING THIS RETURN	
7171.5		DATE

FAILURE TO FILE A COMPLETE TAX RETURN PRIOR TO ITS DUE DATE WILL RESULT IN SUSPENSION OF YOUR PERMITS AND THE OHIO STATE PATROL BEING NOTIFIED OF SUCH ACTION.

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STATE OF OHIO DEPARTMENT OF TAXATION

HIGHWAY USE TAX

68 EAST GAY STREET, COLUMBUS, OHIO 43215 PHONE (AREA CODE 614) 469-3921

APPLICATIONS NOT COMPLETED IN ACCORDANCE WITH THESE INSTRUCTIONS WILL BE RETURNED INSTRUCTIONS FOR COMPLETING APPLICATION FOR HIGHWAY USE PERMIT

- Give the exact full first, middle and last name of vehicle owner, or if a partnership, each partner's
 full name. If initials only, indicate by inserting (ONLY) in parenthesis, following the initials. If
 owner has no middle name, indicate by inserting (NONE) above the space provided for middle name.
 Also insert Social Security Number of owner or owners.
- 2. Check whether the owner is an individual, partnership or corporation. If owner is a corporation, indicate Federal Employer Identification Number.
- 3. Give legal residence of owner, Street or RFD No. Lessee's address is not acceptable.
- 4. If original permit is to be sent to an address other than the owner's address, so indicate.
- 5. Has the owner shown on Line 1 been previously issued an Ohio Highway Use Permit? If answer is yes, please indicate permit number assigned.
- 6. List all commercial cars and/or tractors which are subject to the Ohio Highway Use Tax. List each vehicle separately and give the appropriate information on each vehicle in spaces provided.

THE COLUMNS UNDER ITEM 6 SHALL CONTAIN THE FOLLOWING INFORMATION:

- (A) Make of Vehicle Trade name of vehicle, i.e., Ford, Mack, etc.
- (B) Year The year in which the vehicle was manufactured.
- (C) Number Axles on Truck or Tractor Indicate number of axles on the commercial car and/or tractor including front axle. Do not include axles of trailers.
- (D) Type of Vehicle Indicate whether the vehicle is a truck or tractor. (A 2 axle truck does not require a permit unless pulling a trailer weighing 3,000 pounds or more.)
- (E) Manufacturer's Serial Number The serial number assigned by the manufacturer which is either stamped, embossed or otherwise affixed to the vehicle. (Motor number not acceptable).
- (F) State in Which Vehicle is Titled Show the State in which the title of the vehicle was issued.
- (G) State in Which Vehicle is Licensed Show the State from which licenses were purchased.

The application must be signed and dated by the owner or his authorized agent.

SEND APPLICATION AND FEE OF \$2.00 FOR EACH PERMIT REQUESTED TO:

OHIO HIGHWAY USE TAX 68 East Gay Street Columbus, Ohio 43215

SEE REVERSE SIDE

THIS IS YOUR COPY. DO NOT MAIL.

NOTE: IN COL. C FRONT & REAR AXLES ON TRUCK OR TRACTOR ONLY. DO NOT INCLUDE AXLES ON TRAILER.

6.	(A) Make Vehicle	(B) Year	(C) Axles	(D) (Truck or Tractor)	(E) Manufacturers Serial Number	(F) State Titled	(G) State Licensed
	1.						
	2.						
	3.						
	4.						
	5.						
	6.						
	7.						
	8.						

Fee of \$2.00 for each permit requested must be submitted with this application.

I declare under the penalties of perjury that	this application (including any accompanying statements)	has been examined by me and to the
best of my knowledge and belief is a true,	correct and complete application.	

TITLE

DATE

NOTICE

TEMPORARY AUTHORITY: In cases of emergency, temporary travel authority for thirty (30) days can be obtained by wiring via Western Union to this department at 68 East Gay Street, Columbus, Ohio, a fee of two dollars (\$2.00) for a new permit, or one dollar (\$1.00) for a replacement permit or identification device, with a request for temporary authority containing the following information:

- a. Request temporary authority
- b. Full name of legal owner (First, Middle and Last)
- c. Legal resident address of owner

SIGNATURE

- d. Manufacturer's serial number of vehicle
- e. Point of authority, "pickup" if different from the owner's legal residence address
- f. Permit number (replacements only)
- g. Account number of owner, if previously registered

A collect telegram will then be dispatched authorizing the travel and must be carried in the cab of the vehicle as evidence of such authorization. After the thirty (30) day temporary authority has been issued, the prescribed application form will be sent to the owner of the vehicle which must be completed and returned to the Highway Use Tax Section of this Department prior to the expiration date of that authority. No additional fee will be required for the issuance of the permanent permit card and identification device but, failure to file this application within the time allotted or pay the tax liability incurred while traveling with a temporary authority, will result in denial of future temporary authority requests. Thirty day temporary authority may also be obtained by written request enclosing the required fee with the completed application. The request must contain a statement as to whether the temporary authority should be wired or mailed, and the point of delivery of such authority, if different from the owner's legal address.

HUT 8

STATE OF OHIO DEPARTMENT OF TAXATION 68 EAST GAY STREET, COLUMBUS, OHIO 43215 PHONE FAREA 614) 469-3921

ACCOUNT NO. _

SOCIAL SECURITY NO.

APPLICATION FOR HIGHWAY USE PERMIT TYPE OR PRINT IN INK

	101	THEORIGINAL	41/	0-	ļ		
4	VEHICLE FIRST				SOCIA	L SECL	IRITY NO.
١.	OWNER FIRST	MIDDLE	LAST	0-			
				_ [FEDE	RAL I	. D. NO.
2.	. 1 = INDIVIDUAL	2 PARTNERSHIP	0 = CORPORATION	1 -			
				L	· · · · · · · · · · · · · · · · · · ·		
3.	OWNER'S LEGAL ADDRESS						
			STREET OR RFD NO.)				
	CITY)	(STATE)		(ZIP	CODE)	
4.	. MAIL PERMIT TO: NAME _						
	ADDRESS						
5	. PLEASE INDICATE YOUR L	AST PERMIT NUMBER ASSIGN	VED				

NOTE: IN COLUMN C COUNT FRONT AND REAR AXLES ON TRUCK OR TRACTOR ONLY. DO NOT INCLUDE AXLES ON TRAILER.

Do Not Use	(A) MAKE VEHICLE	(B) YEAR	(C)	O (D) 1 TRUCK OR TRACTOR	(E) MANUFACTURERS SERIAL NUMBER	(F) STATE TITLED	(G) STATE LICENSED
	1.						
	2.						
	3.						
	4.						
	5.	,					
	6.						
	7.						
	8.						

FEE OF \$2.00 FOR EACH PERMIT REQUESTED MUST BE SUBMITTED WITH THIS APPLICATION.

I DECLARE UNDER THE PENALTIES OF PERJURY THAT THIS APPLICATION (INCLUDING ANY ACCORDETE IS A TRUE, CORRECT AND COMPLETE APPLICATION.	E UNDER THE PENALTIES OF PERJURY THAT THIS APPLICATION (INCLUDING ANY ACCOMPANYING STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND A TRUE, CORRECT AND COMPLETE APPLICATION. SIGNATURE					
SIGNATURE	TITLE	DATE				

July August Systemeter 1971

Mew York West Virginia

Thrumy State Truck Mileage 36-520185-0011 #9 Mark (Hastin) Ohio Boorum & Pease G15-6 Wooster Columbus Buffels, N. Y. Oberon Columbus Obsern Cleveland akum Clevelal Mendrille, Pa Ahron Allenn 220 90 Cuvila # 1 Van E. ausora, N. Columbus Michigan E Aurora, N Port Churto Cleveland 240 120 120 Colembus P Clenta Clevela W. Deboot, Mach. . akron 90 Van Industry Pa Woosth Notes alton, A Howards, Ky. Akron Howards, Ky Colembra
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HUT 15 _OHIO HIGHWAY USE TAX RETURN

(1) PERMIT NO.		(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	LIST OHO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURN	NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
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36520185	010	.01	2690	40.35			
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				CB #7	537		

AMOUNT REMITTED WITH THIS RETURN

305.61

IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED.

THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

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- COLUMN NO. 2 Report rate of tax under which vehicle traveled. The rates are as follows:

1/2 cent per mile for a truck (straight) with three or more axles. 1 cent per mile for tractor-trailer -3 axle combination.

- 1 1/2 cent per mile for tractor-trailer 4 axle combination.
 2 cents per mile for tractor-trailer 5 axle combination.
 2 1/2 cents per mile for tractor and double trailers.

- 2 1/2 cents per mile for truck and pull trailer (4 wheeler).

(See schematic drawings on reverse side)

- COLUMN NO. 3 Report empty and loaded Ohio miles for each vehicle for which you are paying the tax on this return. Do not report in this column any mileage which you are reporting in Column 5. If a vehicle did not travel in Ohio or if all miles were nontaxable, write "None" opposite that permit.
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If supplemental sheets (H.U.T. 15-D) are used, the permit listing will be made on the supplemental sheets and only the amount remitted entered on the card (H.U.T. 15).

Supplemental sheets will be furnished upon request.

(1) PERMIT NO.	(1) PERMIT R/ NO. OF		(3) LIST OHO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURN	NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
X10035	001	.015	14000	\$210.00			
X10035	001	.020	15000	300.00			<u> </u>
X10035	001	.020			12000	Red Ryder Transit	
X10035	002	.015			15000	Fanner Truck Lines	
X10035	003		None				
					JH	NVIPL	

510,00

IF SUPPLEMENTAL SHEETS ARE USED. ENTER ONLY AMOUNT REMITTED.

10/19/67

(See Reverse Side)

Owner



STATE OF OHIO DEPARTMENT OF TAXATION HIGHWAY USE TAX SECTION

68 EAST GAY STREET, COLUMBUS, OHIO 43215 TELEPHONE (AREA CODE 614) 469 - 3921

READ CAREFULLY IMPORTANT INFORMATION

The Ohio Highway Use Tax Law requires that a Quarterly Highway Use Tax Return, HUT Form 15, must be filed by both the owner of the vehicle and any other party who is either leasing, renting, or operating the vehicle under some such arrangement. The return, and payment of the tax, must be received on or before the 20th day of the month following each calendar quarter.

Each lessor (owner) and lessee (one who leases) must maintain complete records, i.e. manifests, trip records, turnpike receipts etc., to support all travel in Ohio. The taxable Ohio miles will include deadhead and loaded miles and all mileage driven within the city limits of any municipality. All manifests, trip sheets etc., must clearly indicate:

- 1. Ohio Highway Use Permit Number
- 2. Company unit number of tractor
- 3. Company unit number of trailers
- 4. Trip starting date
- 5. Origin and destination of trip
- Ohio miles
 Rate of tax Rate of tax to be applied
- 8. Manifest or trip record number and if used
 - a. Speedometer reading start of calendar quarter
 - b. Speedometer reading end of calendar quarter

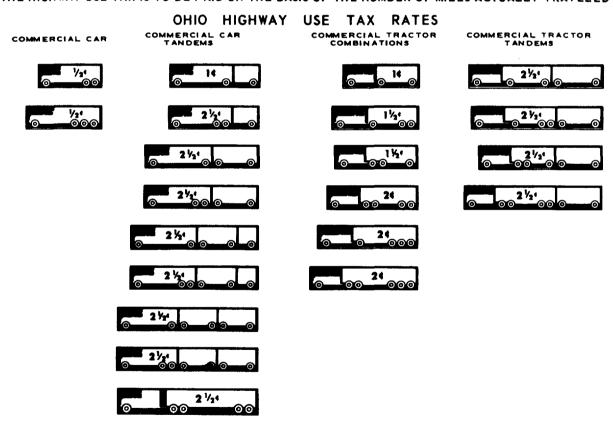
Mileage accrued by travel on the Ohio Turnpike SHOULD NOT BE REPORTED on the quarterly highway use tax return (HUT Form 15). However, manifests should reveal all miles traveled in the State of Ohio, including those traveled on the Ohio Turnpike. Receipts obtained from the toll plaza, upon departure from the Ohio Turnpike must be maintained to substantiate the miles traveled on the Ohio Turnpike as shown on manifests. Such receipts or charge account statements must be fully identified as to the date, tractor, trailer and manifest number, or be attached to the trip manifest which does show this information.

Mileage traveled while operating by Ohio temporary authority is taxable and can be reported by the temporary authority number, (Example Z300000), if the permit number is unknown.

CANCELLATION OF PERMITS:

Highway Use Permits are not transferable from vehicle to vehicle nor from owner to owner. If a vehicle is sold, traded or otherwise disposed of, you must return the current identification device and the permit card to the Department of Taxation, Highway Use Tax Section, 68 East Gay Street, Columbus, Ohio 43215, and request that the permit be cancelled.

THE HIGHWAY USE TAX IS TO BE PAID ON THE BASIS OF THE NUMBER OF MILES ACTUALLY TRAVELED



(1) PERMIT NO.	(2) RATE OF TAX	(3) LIST ONIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST ONIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURN	(4) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN S	(7) DO HOT USE FOR AUDIT ONLY
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36-520185-	8 .02	7422	148.44			
36-520185-	10.01	½ 810	12.15			
			:			

AMOUNT REMITTED WITH THIS RETURN

274.19

IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED.

THIS IS YOUR COPY DO NOT MA

INSTRUCTIONS FOR PREPARING YOUR RETURN

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Supplemental sheets will be furnished upon request.

(1) PERMIT NO.		(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURN	NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN S	(7) DO NOT USE FOR AUDIT ONLY
X10035	001	.015	14000	\$210.00			
X10035	001	.020	15000	300.00			
X10035	001	.020			12000	Red Ryder Transit	
X10035	002	.015			15000	Fanner Truck Lines	
X10035	003		None				
					JF	MARCH	

AMOUNT REMITTED WITH THIS RETURN

510.00

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT,

10/19/67 <u>Owner</u>

(See Reverse Side)

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(2) RATE OF TAX	LIST OND MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	TAX DUE ON MILES REPORTED IN COLLING 3	LET GEOMES PAR WHO OTHERS WILL PAR THE TAX THE TAX	NAME OF PRINCE TO COMPANY WIND WILL PAY THE TAX SO ME AS SHOWN	to Myr Pog Albert GHLV
. 02	5133	102.66			
.02	8733	174.66			
.0	£ 3980	59.70			
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337.02

Pd.7-19-71 #7957

THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

FAILURE TO FILE A COMPLETE TAX RETURN PRIOR TO ITS DUE DATE WILL RESULT IN SUSPENSION OF YOUR PERMITS AND THE OHIO STATE PATROL BEING NOTIFIED OF SUCH ACTION.

- COLUMN NO. 1 All permits which were not cancelled prior to the beginning of the calendar quarter are shown on the tax return. If the vehicle traveled under more than one rate of tax, insert the permit number including the alphabetical prefix, for each tax rate below the permits which are listed.
- COLUMN NO. 2 Report rate of tax under which vehicle traveled. The rates are as follows:

1/2 cent per mile for a truck (straight) with three or more axles.

1 cent per mile for tractor-trailer — 3 axle combination.

- 1 1/2 cent per mile for tractor-trailer 4 axle combination.

 2 cents per mile for tractor-trailer 5 axle combination.

- 2 1/2 cents per mile for tractor and double trailers.
 2 1/2 cents per mile for truck and pull trailer (4 wheeler).

(See schematic drawings on reverse side)

- COLUMN NO. 3 Report empty and loaded Ohio miles for each vehicle for which you are paying the tax on this return. Do not report in this column any mileage which you are reporting in Column 5. If a vehicle did not travel in Ohio or if all miles were nontaxable, write "None" opposite that permit.
- COLUMN NO. 4 Report the amount of tax due on the mileage reported in Column 3. This is determined by multiplying the mileage shown in Column 3 by the tax rate shown in Column 2.
- COLUMN NO. 5 Report in this column the Ohio mileage on which the tax that is due will be paid and/or reported on the tax return of the lessee or lessor.
- COLUMN NO. 6 Report the name of the lessee or lessor (company or person) who will pay and/or report the tax on the mileage reported in Column 5.

If supplemental sheets (H.U.T. 15-D) are used, the permit listing will be made on the supplemental sheets and only the amount remitted entered on the card (H.U.T. 15).

Supplemental sheets will be furnished upon request.

(1) PERMIT NO.		(2) RATE OF TAX	LIST (HID MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	TAX DIJE (4) REPORTED IN COLUMN 3	(S) LIST (HIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURN	HAME OF PERSON OR COMPANY WHO WILL PAY THE YEL SHI SH. ES SHOWN M COLUMN S	(7) DO NOT USE FOR AUDIT GMLY
X10035	001	.015	14000	\$210.00			
X10035	001	.020	15000	300.00			
X10035	001	.020			12000	Red Ryder Transit	
X10035	002	.015			15000	Fanner Truck Lines	
X10035	003		None				
						AMPL	

510.00

SUPPLEMENTAL SHEETS ARE USED. ENTER ONLY AMOUNT REMITTED.

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELLEF IS A TAVE, CORRECT AND COMPLETE BETURN AND REPORT.

<u>Owner</u>

10/19/67

(See Reverse Side)

The Second Junter 1971

70'LEE 0868 40' 01-581085-98
97'741 EE 48 40' 8-581085-98
19'801 EE15 40: 4-981085-98

Pd. 10-20-71

OHIO HIGHWAY USE TAX RETURN

HUT 15

(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST OHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE TAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	(7) DO NOT USE FOR AUDIT ONLY
36-520185-0008	. 02	8072	161.44			
36-520185-0010	.01-	3060	45.90			
36-520185-0010 36-520185-0011	. 02	8020	160.40			
					^	

AMOUNT REMITTED \$ 367.74

IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

17.	SIGNATURE OF PERSON F	ILING THIS RETURN
Vica	President	10/7/71
VICE	reacuera	
TITLE		DATE

THIS IS YOUR COPY DO NOT MAIL

INSTRUCTIONS FOR PREPARING YOUR RETURN

- COLUMN NO. 1 All permits which were not cancelled prior to the beginning of the calendar quarter are to be reported on your tax return. If the vehicle traveled under more than one rate of tax, insert the permit number for each tax rate below the permits which are listed, or interline the rate and miles.
- COLUMN NO. 2 Report rate of tax under which vehicle traveled (See schematic drawings below)
- COLUMN NO. 3 Report empty and loaded Ohio miles for each vehicle for which you are paying the tax. If a vehicle did not travel in Ohio or if all miles were nontaxable, write "None" opposite that permit. Mileage on the Ohio Toll Turnpike should not be reported.
- COLUMN NO. 4 Report the amount of tax due on the mileage reported in Column 3. This is determined by multiplying the mileage shown in Column 3 by the tax rate shown in Column 2.
- COLUMN NO. 5 Report in this Column the Ohio mileage on which the tax that is due will be paid by the lessee or lessor.
- COLUMN NO. 6 Report the name of the lessee or lessor (company or person) who will pay the tax on the mileage reported in Column 5.

OHIO HIGHWAY USE TAX RETURN

HUT 15

(1) PERMIT NUMBER	(2) RATE OF TAX	(3) LIST CHIO MILES FOR WHICH YOU ARE PAYING THE TAX ON THIS RETURN	(4) TAX DUE ON MILES REPORTED IN COLUMN 3	(5) LIST OHIO MILES FOR WHICH OTHERS WILL PAY THE YAX ON THEIR RETURNS	(6) NAME OF PERSON OR COMPANY WHO WILL PAY THE TAX ON MILES SHOWN IN COLUMN 5	DO NOT USE FOR AUDIT ONLY
53-002345-0001	. 015	14000	\$210.00			
53-002345-0001	020	15000	300.00			
53-002345-0002	020			12000	Red Ryder Transit	
53-002345-0003	015			15000	Fanner Truck Lines	
53-002345-0004		None				
				SA	MPLE	
				37	MPLE	

AMOUNT REMITTED \$ 510.00

IF SUPPLEMENTAL SHEETS ARE USED, ENTER ONLY AMOUNT REMITTED

I DECLARE UNDER PENALTIES OF PERJURY THAT THIS RETURN (INCLUDING ANY ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE RETURN AND REPORT.

SIGNATURE OF PERSON FILING THIS RETURN

PLEASE DO NOT FOLD, BEND OR STAPLE THIS CARD

TITLE	DATE

FAILURE TO FILE A COMPLETE TAX RETURN PRIOR TO ITS DUE DATE WILL RESULT IN SUSPENSION OF YOUR PERMITS AND THE OHIO STATE PATROL BEING NOTIFIED OF SUCH ACTION.

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MADE IN U.S.A

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New York | West Virginia) Truck Mileage K2-0185-008 #7 White Con and Boorum & Pease Harvatical Gliskland Gentland Hts Columbus Uprose (Via turngike) Bradsfaw Stellmens 18.1 (turngine) Emperical de Var 1 9 180 50 45 Clan 20 Mar. Dirty tank illene 90 50 Worster MADE IN U.S.A.

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